

## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	211648591	Report Filed By (Mark X)	<input checked="" type="checkbox"/> Candidate	<input type="checkbox"/> Committee	<input type="checkbox"/> Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Denise M. Buell				
Street Address	19039 Hillcrest Drive				
City	Corry	State	PA	Zip Code	16407

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	11/7/17	Year	2017	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	6/2/17	10/23/17	
A. Amount Brought Forward From Last Report	\$		2017 OCT 25 PM 2:53 ERIE COUNTY VOTER REGISTRATION KLS
B. Total Monetary Contributions and Receipts (From Schedule I)	\$		
C. Total Funds Available (Sum of Lines A and B)	\$		
D. Total Expenditures (From Schedule III)	\$	1746.97	
E. Ending Cash Balance (Subtract Line D from Line C)	\$		
F. Value of In-Kind Contributions Received (From Schedule II)	\$		
G. Unpaid Debts and Obligations (From Schedule IV)	\$		

## Affidavit Section

Part I- If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

23 day of OCTOBER 20 17

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL

Janet E. Givak, Notary Public

City of Corry, Erie County

My Commission Expires July 5, 2018

MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

*Denise M. Buell*  
Signature of Person Submitting report  
Denise M. Buell

Printed Name

814

Area Code

881-0437

Daytime Telephone Number

Part II- If this is a report of a **Candidate's Authorized Committee**, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this

day of 20

Signature

My Commission expires

MO. DAY YR.

Signature of Candidate

Printed Name

Area Code

Daytime Telephone Number

SCHEDULE I  
**Contributions and Receipts**  
Detailed Summary Page

<b>Filer Identification Number</b>	211648591	
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<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>		
Total for the reporting period	(1)	\$ 0

  

<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
Contributions Received from Political Committees (Part A)		\$ 0
All Other Contributions (Part B)		\$ 0
Total for the reporting period	(2)	\$ 0

  

<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
Contributions Received from Political Committees (Part C)		\$ 0
All Other Contributions (Part D)		\$ 0
Total for the reporting period	(3)	\$ 0

  

<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
Total for the reporting period	(4)	\$ 0
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$ 0

## PART A

**Contributions Received From Political Committees**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees  
with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification Number		211648591									
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											Amount		
Full Name of Contributing Committee						N/A					Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee											Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee											Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee											Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee											Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee											Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee											Date [MM/DD/YYYY]	\$	
House #						Street Address					Date [MM/DD/YYYY]	\$	
City					State				Zip Code		Date [MM/DD/YYYY]	\$	

PART B

# All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number: 211648591					
Full Name of Contributor				Date [MM/DD/YYYY]	\$
N/A					
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	

**PART C**  
**Contributions Received From Political Committees**  
Over \$250.00

Use this Part to itemize only contributions received from Political Committees  
with an aggregate value over \$250.00 in the reporting period.

Filer Identification Number:	211648591
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Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
N/A							
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code			

PART D  
**All Other Contributions**

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C)

Filer Identification Number	211648591
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Full Name of Contributor				Date [MM/DD/YYYY]		\$	
N/A							
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							

## PART E

**Other Receipts**

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number:	211648591
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Full Name	N/A							
House #		Street Address						
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description								
Full Name								
House #		Street Address						
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description								
Full Name								
House #		Street Address						
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description								
Full Name								
House #		Street Address						
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description								
Full Name								
House #		Street Address						
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description								
Full Name								
House #		Street Address						
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description								

**SCHEDULE II**

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD  
DETAILED SUMMARY PAGE**

Filer Identification Number	211648591
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the reporting period (1)	\$	0

<b>2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>		
TOTAL for the reporting period (2)	\$	0

<b>3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the reporting period (3)	\$	0

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)	\$	0
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**SCHEDULE II**

**PART F**

**In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

<b>Filer Identification Number:</b>	211648591
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
N/A							
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Contribution</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Contribution</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Contribution</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Contribution</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	

SCHEDULE II  
Part G  
**In-Kind Contributions Received**  
VALUE OVER \$250

Filer Identification Number:	211648591
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Full Name of Contributor				Date [MM/DD/YYYY]		\$
N/A						
House #	Street Address			Date [MM/DD/YYYY]		\$
City		State	Zip Code	Date [MM/DD/YYYY]		\$
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address			Date [MM/DD/YYYY]		\$
City		State	Zip Code	Date [MM/DD/YYYY]		\$
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address			Date [MM/DD/YYYY]		\$
City		State	Zip Code	Date [MM/DD/YYYY]		\$
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address			Date [MM/DD/YYYY]		\$
City		State	Zip Code	Date [MM/DD/YYYY]		\$
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		

**SCHEDULE III**  
**Statement of Expenditures**

Filer Identification Number: 211648591

<b>To Whom Paid</b>		Discount Favors.Com		<b>Date [MM/DD/YYYY]</b>		\$ 142.70
<b>House #</b>	7801	<b>Street Address</b>		<b>Description of Expenditure</b>		
		NW 67th Street				
<b>City</b>	Miami	<b>State</b>	FL	<b>Zip Code</b>	33166	5" Frisbees for campaign booth - corry fest
<b>To Whom Paid</b>		Ink-Spot.Com		<b>Date [MM/DD/YYYY]</b>		\$ 216.10
<b>House #</b>	1	<b>Street Address</b>		<b>Description of Expenditure</b>		
		W Deer Valley Rd				
<b>City</b>	Phoenix	<b>State</b>	AZ	<b>Zip Code</b>	85027	Imprinted Pens for Campaign Booths
<b>To Whom Paid</b>		Party City		<b>Date [MM/DD/YYYY]</b>		\$ 64.06
<b>House #</b>	1908	<b>Street Address</b>		<b>Description of Expenditure</b>		
		Keystone Drive				
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16509	Air Tank, Balloons, Tattoos for Corry Fest Booth
<b>To Whom Paid</b>		Sam's Club		<b>Date [MM/DD/YYYY]</b>		\$ 67.38
<b>House #</b>	7200	<b>Street Address</b>		<b>Description of Expenditure</b>		
		Peach Street				
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16509	Candy for Corry Fest Parade
<b>To Whom Paid</b>		Walmart		<b>Date [MM/DD/YYYY]</b>		\$ 14.64
<b>House #</b>	961	<b>Street Address</b>		<b>Description of Expenditure</b>		
		E Columbus Avenue				
<b>City</b>	Corry	<b>State</b>	PA	<b>Zip Code</b>	16407	Candy for Corry Fest Parade
<b>To Whom Paid</b>		Discount Mugs		<b>Date [MM/DD/YYYY]</b>		\$ 226.00
<b>House #</b>	12610	<b>Street Address</b>		<b>Description of Expenditure</b>		
		NW 115th Avenue				
<b>City</b>	Miami	<b>State</b>	FL	<b>Zip Code</b>	33178	Imprinted Frisbees for French Creek Festival Booth
<b>To Whom Paid</b>		Oriental Trading		<b>Date [MM/DD/YYYY]</b>		\$ 78.95
<b>House #</b>	4206	<b>Street Address</b>		<b>Description of Expenditure</b>		
		S 108th Street				
<b>City</b>	Omaha	<b>State</b>	NE	<b>Zip Code</b>	68137	Balloons and sticks for French Creek Festival Booth
<b>To Whom Paid</b>		Vista Print		<b>Date [MM/DD/YYYY]</b>		\$ 278.77
<b>House #</b>		<b>Street Address</b>		<b>Description of Expenditure</b>		
		Hudsonweg 8				
<b>City</b>	Venlo - Netherlands	<b>State</b>		<b>Zip Code</b>	2938LW	Campaign Brochures qty 1000

**SCHEDULE III**  
**Statement of Expenditures**

Filler Identification Number: 211648591

<b>To Whom Paid</b> Walmart					<b>Date [MM/DD/YYYY]</b> 9/6/17	<b>\$</b> 8.29
<b>House #</b> 961	<b>Street Address</b> E Columbus Avenue			<b>Description of Expenditure</b>		
<b>City</b> Corry	<b>State</b> PA	<b>Zip Code</b> 16407	Decorations for float			
<b>To Whom Paid</b> Walmart					<b>Date [MM/DD/YYYY]</b> 9/9/17	<b>\$</b> 32.20
<b>House #</b> 961	<b>Street Address</b> E Columbus Avenue			<b>Description of Expenditure</b>		
<b>City</b> Corry	<b>State</b> PA	<b>Zip Code</b> 16407	decorations & Candy for float			
<b>To Whom Paid</b> Sam's Club					<b>Date [MM/DD/YYYY]</b> 9/13/17	<b>\$</b> 71.86
<b>House #</b> 7200	<b>Street Address</b> Peach Street			<b>Description of Expenditure</b>		
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16509	Candy For Float			
<b>To Whom Paid</b> Oriental Trading					<b>Date [MM/DD/YYYY]</b> 9/12/17	<b>\$</b> 73.93
<b>House #</b> 4206	<b>Street Address</b> S 108th Street			<b>Description of Expenditure</b>		
<b>City</b> Omaha	<b>State</b> NE	<b>Zip Code</b> 68137	decoratoins for float Corry Float			
<b>To Whom Paid</b> Target					<b>Date [MM/DD/YYYY]</b> 9/13/17	<b>\$</b> 7.37
<b>House #</b> 6700	<b>Street Address</b> Peach Street			<b>Description of Expenditure</b>		
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16509	Stuff to make posters for Float			
<b>To Whom Paid</b> Walmart					<b>Date [MM/DD/YYYY]</b> 9/14/17	<b>\$</b> 8.48
<b>House #</b> 961	<b>Street Address</b> E Columbus Avenue			<b>Description of Expenditure</b>		
<b>City</b> Corry	<b>State</b> PA	<b>Zip Code</b> 16407	Corry Parade Float decorations			
<b>To Whom Paid</b> Oriental Trading					<b>Date [MM/DD/YYYY]</b> 9/21/17	<b>\$</b> 45.93
<b>House #</b> 4206	<b>Street Address</b> S 108th Street			<b>Description of Expenditure</b>		
<b>City</b> Omaha	<b>State</b> NE	<b>Zip Code</b> 68137	decorations for UC Float			
<b>To Whom Paid</b> Facebook Ads					<b>Date [MM/DD/YYYY]</b> 10/2/17	<b>\$</b> 50.00
<b>House #</b> 1	<b>Street Address</b> Hecker Way			<b>Description of Expenditure</b>		
<b>City</b> Menlo Park	<b>State</b> CA	<b>Zip Code</b> 94025	Cost to boost facebook ad			

SCHEDULE III  
Statement of Expenditures

<b>Filer Identification Number:</b>	211648591
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<b>To Whom Paid</b>		Sam's Club		<b>Date [MM/DD/YYYY]</b>		10/3/17	<b>\$</b>	83.84
<b>House #</b>	7200	<b>Street Address</b>		Peach Street		<b>Description of Expenditure</b>		
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16509	Candy for Float		
<b>To Whom Paid</b>		Erie Co Courthouse		<b>Date [MM/DD/YYYY]</b>		10/3/17	<b>\$</b>	35.00
<b>House #</b>	140	<b>Street Address</b>		West 6th Street		<b>Description of Expenditure</b>		
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16501	Cost for Super List		
<b>To Whom Paid</b>		Imprint.Com		<b>Date [MM/DD/YYYY]</b>		10/16/17	<b>\$</b>	193.80
<b>House #</b>	14550	<b>Street Address</b>		Beechnut Street		<b>Description of Expenditure</b>		
<b>City</b>	Houston	<b>State</b>	TX	<b>Zip Code</b>	77083	Customized Wristbands for Campaign		
<b>To Whom Paid</b>		True Value		<b>Date [MM/DD/YYYY]</b>		10/17/17	<b>\$</b>	47.67
<b>House #</b>	630	<b>Street Address</b>		E Columbus Avenue		<b>Description of Expenditure</b>		
<b>City</b>	Corry	<b>State</b>	PA	<b>Zip Code</b>	16407	solar lights for signs		
<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>			<b>\$</b>	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>			<b>\$</b>	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>			<b>\$</b>	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>			<b>\$</b>	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				

**SCHEDULE IV**

**Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

<b>Filer Identification Number:</b>	211648591
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<b>Name of Creditor</b>					N/A		<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$		
<b>City</b>				<b>State</b>	<b>Zip Code</b>			
<b>Description of Debt</b>								
<b>Name of Creditor</b>							<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$		
<b>City</b>				<b>State</b>	<b>Zip Code</b>			
<b>Description of Debt</b>								
<b>Name of Creditor</b>							<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$		
<b>City</b>				<b>State</b>	<b>Zip Code</b>			
<b>Description of Debt</b>								
<b>Name of Creditor</b>							<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$		
<b>City</b>				<b>State</b>	<b>Zip Code</b>			
<b>Description of Debt</b>								
<b>Name of Creditor</b>							<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$		
<b>City</b>				<b>State</b>	<b>Zip Code</b>			
<b>Description of Debt</b>								